2005 NOT-FOR-PROFIT CORPORATION ANNUAL REPORT

FILED
Apr 27, 2005
Secretary of State

DOCUMENT# N97000003204

Entity Name: FIRST UNITED METHODIST PRE-SCHOOL, INC.

Current Principal Place of Business:

1500 SOUTH KANNER HIGHWAY
STUART, FL 34996

New Principal Place of Business:

Current Mailing Address:

P.O. BOX 539
STUART, FL 34995

New Mailing Address:

FEI Number: 65-0714099 **FEI Number Applied For ( )** **FEI Number Not Applicable ( )** **Certificate of Status Desired ( )**

Name and Address of Current Registered Agent:

FARROW, SUE
1500 SOUTH KANNER HIGHWAY
STUART, FL 34996 US

Name and Address of New Registered Agent:

The above named entity submits this statement for the purpose of changing its registered office or registered agent, or both, in the State of Florida.

SIGNATURE: _____

Electronic Signature of Registered Agent — Date

OFFICERS AND DIRECTORS:

Title: D ( ) Delete
Name: MERRILL, DAVID
Address: 373 SW NATIVITY TERR
City-St-Zip: PORT SAINT LUCIE, FL 34984

Title: S ( ) Delete
Name: MOORE, LAURIE
Address: 5505 SE MARTIN AVE
City-St-Zip: STUART, FL 34997

Title: D ( ) Delete
Name: BLOUNT, DEE
Address: 1360 SANDPIPER LN
City-St-Zip: STUART, FL 34996

Title: V ( ) Delete
Name: GEHRON, CHERYL
Address: 5401 SE MEADOW SPRING
City-St-Zip: STUART, FL 34997

Title: P ( ) Delete
Name: DALY, FRANK
Address: 5547 SW CORAL TREE LANE
City-St-Zip: PALM CITY, FL 349908535

ADDITIONS/CHANGES TO OFFICERS AND DIRECTORS:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

Title: ( ) Change ( ) Addition
Name:
Address:
City-St-Zip:

I hereby certify that the information supplied with this filing does not qualify for the for the exemption stated in Section 119.07(3)(i), Florida Statutes. I further certify that the information indicated on this report or supplemental report is true and accurate and that my electronic signature shall have the same legal effect as if made under oath; that I am an officer or director of the corporation or the receiver or trustee empowered to execute this report as required by Chapter 617, Florida Statutes; and that my name appears above, or on an attachment with an address, with all other like empowered.

SIGNATURE: JACKI JACKSON DIRE 04/27/2005

Electronic Signature of Signing Officer or Director — Date